Revision: HCFA-PM-91-8 (BPD) ATTACHMENT 2.2-A October 1991 Page 26a OMB NO.: 0938-State: Indiana Citation(s) Groups Covered C. Optional Coverage of Medically Needy (Continued) 1906 of the 12. Individuals required to enroll in cost effective employer-based group Act health plans remain eligible for a minimum

enrollment period of \_\_\_\_ months.

TN No. 92-18
Supersedes
TN No. -

Revision: HCFA-PM-91-4 (BPD)

AUGUST 1991

SUPPLEMENT 1 TO ATTACHMENT 2.2-A

Page 1

OMB NO.: 0938-

STATE	PT.AN	UNDER	ד.וידות	YTY	OF	THE	SOCIAL	SECURITY	ACT
				$\Delta \Delta \Delta$				0000111	7.0-

State: INDIANA

## REASONABLE CLASSIFICATIONS OF INDIVIDUALS UNDER THE AGE OF 21, 20, 19, AND 18

- 1. Individuals age 18, 19, 20 who meet all AFDC requirements except for the 18 year old limitation. (10-1-81)
- 2. Individuals under the age of 18 who are legally in the custody of or supervision of the County Departments of Public Welfare or the Indiana Family & Social Services Administration.

TN No. 91-22
Supersedes Approval Date 1-16-92 Effective Date 1-1-92
TN No. 89-20

HCFA ID: 7983E



Revision:	HCFA-PM-91-4 (BPD) SUPPLEMENT 3 TO ATTACHMENT 2.2-A AUGUST 1991 Page 1 OMB NO.: 0938-
	STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
	State/Territory:INDIANA
	Method for Determining Cost Effectiveness of Caring for Certain Disabled Children At Home
	N/A
	:

TN No. 91-22 Supersedes TN No. New Effective Date 1-1-93

HCFA ID: 7983E

## **OFFICIAL**